

2013 Monthly Contributions/Premium Rates – Active

| Cafeteria Contributions | | |
|--|--------------|----------------|
| | Contribution | Opt-Out Amount |
| CEA, Key & Management, League & Prof /Tech | \$1,364.00 | \$1,249.00 |
| FA & FMA | \$1,289.00 | \$1,149.00 |
| LMA | \$1,264.00 | \$1,149.00 |
| PA | \$1,389.00 | \$1,274.00 |
| PMA | \$1,239.00 | \$1,124.00 |

Other Southern California Region – Orange, Riverside, San Diego, Fresno, Imperial Inyo, Kern, Kings, Madera, San Luis Obispo, Santa Barbara and Tulare Counties:

PERS HMO Plans

| Family Status | Kaiser HMO | Blue Shield HMO | Blue Shield Net Value HMO |
|----------------------|------------|-----------------|---------------------------|
| Employee Only | \$558.95 | \$643.93 | \$550.03 |
| Employee + 1 | \$1,117.90 | \$1,287.86 | \$1,100.06 |
| Employee + 2 or more | \$1,453.27 | \$1,674.22 | \$1,430.08 |

PERS PPO Plans

| Family Status | PERS Choice | PERS Select | PERSCare | PORAC |
|----------------------|-------------|-------------|------------|------------|
| Employee Only | \$611.30 | \$446.49 | \$992.61 | \$581.00 |
| Employee + 1 | \$1,222.60 | \$892.98 | \$1,985.22 | \$1,088.00 |
| Employee + 2 or more | \$1,589.38 | \$1,160.87 | \$2,580.79 | \$1,382.00 |

Dental & Vision Plans

| Family Status | Delta Dental DHMO | Delta Dental PPO | SafeGuard PPO Vision |
|----------------------|-------------------|------------------|----------------------|
| Employee Only | \$14.01 | \$59.95 | \$7.30 |
| Employee + 1 | \$25.21 | \$122.00 | \$14.28 |
| Employee + 2 or more | \$37.95 | \$179.33 | \$20.39 |

Los Angeles Area – Los Angeles, San Bernardino and Ventura Counties:

You may choose from one of the following plans if you reside in one of the Los Angeles Area counties AND wish to receive your medical services in the same county.

PERS HMO Plans

| Family Status | Kaiser HMO | Blue Shield HMO | Blue Shield Net Value HMO |
|----------------------|------------|-----------------|---------------------------|
| Employee Only | \$502.40 | \$530.75 | \$453.35 |
| Employee + 1 | \$1,004.80 | \$1,061.50 | \$906.70 |
| Employee + 2 or more | \$1,306.24 | \$1,379.95 | \$1,178.71 |

PERS PPO Plans

| Family Status | PERS Choice | PERS Select | PERSCare | PORAC |
|----------------------|-------------|-------------|------------|------------|
| Employee Only | \$587.46 | \$429.08 | \$953.90 | \$581.00 |
| Employee + 1 | \$1,174.92 | \$858.16 | \$1,907.80 | \$1,088.00 |
| Employee + 2 or more | \$1,527.40 | \$1,115.61 | \$2,480.14 | \$1,382.00 |